

Joint SDG Fund PORTOFLIO ON INTEGRATED POLICY AND LNOB

Joint Programme 2021 Annual Progress Report

31 January 2022

Cover page

Country: Republic of Congo

Joint Programme title: Improvement of the living conditions of the indigenous populations of the department of Lékoumou through improved access to social protection programmes in the Republic of Congo.

Short title: Social protection for the indigenous populations of Congo

Start date (day/month/year): 14 February 2020 End date (day/month/year): 30 June 2022

RC (name): Chris MBURU

Government Joint Programme Focal Point (name and ministry/agency): Mrs. Sylviane Kamba, Ministry of

Social Affairs and Humanitarian Action

Representative of Lead PUNO (name and agency): Mr. Ali OUATTARA, World Food Programme (WFP)

List of PUNOs: WFP, WHO, UNICEF

RCO Main JP Focal Point (name): Mrs. Mirhame Mshangama E-mail: mirhame.msangama@un.org Lead Agency Main JP Focal Point (name): Mr. Ali OUATTARA, WFP E-mail: ali.ouattara@wfp.org Contact person for Joint Communications (name): Aurelia Jessica Emmanuella Ickonga, UNICEF E-mail: ajeickonga@unicef.org

Budget (Joint SDG Fund contribution): 2 000 000 USD

Overall budget (with co-funding): 4 714 966 USD

Total estimated expenditure (in USD, for the whole JP by 31 Dec 2021): 1 558 467

Total estimated commitments (in USD, for the whole JP by 31 Dec 2021): 1 687 119

Short description of the Joint Programme

This joint programme seeks to strengthen the capacities of central al local authorities in the Lékoumou department to enhance the well-being of the department's vulnerable populations, particularly through health centres and schools. It highlights the relevance of joint and integrated responses as well as the complementarity of the mandates of WFP, UNICEF and WHO. Through the Ministry of Social Affairs and Humanitarian Action, the Congolese government has an essential role in this joint programme by chairing the Steering Committee composed of representatives of all stakeholders. It is responsible for establishing the strategic orientations of the programme while ensuring national ownership of the interventions.



Executive summary

The Republic of Congo, through the Ministry of Social Affairs and Humanitarian Action (MASAH), received funding from the Joint SDG Fund for a joint programme (JP) that started in February 2020 in Sibiti. The main objective is to support the government's efforts to improve living circumstances and access to social protection for indigenous people in the Lékoumou department. This region is a low-income region where 25 percent of the Congo's indigenous people reside. The programme seeks to improve social protection services for vulnerable indigenous and Bantu people by enhancing the structures and capabilities of government institutions, civil society organisations and communities. Besides, the programme proposed to double the percentage of indigenous people with birth certificates or national identity documents, reduce the mortality rate of out-of-school children by 40% by providing vulnerable children with contextually appropriate education and support, reduce the gap between maternal, new-born mortality and child mortality rate and, increase the DCT3 vaccination rate in Lékoumou by 20 percent.

To achieve integrated policy solutions to accelerate SDG achievement, the joint programme organised a national advocacy workshop in June 2021 involving all stakeholders (government, universities, civil society, and UN agencies). This workshop resulted in adopting a roadmap to strengthen national coordination in the implementation of Law 05-2011, aiming to ensure access to social protection programmes for indigenous populations in the Republic of Congo. In addition, the 50 governmental authorities were sensitised in specialised sessions on the law on indigenous peoples, and 155 people were sensitised through targeted communication campaigns on the laws relating to land acquisition and the rights of indigenous peoples. The main features of the programme were the strengthening of the technical and operational capacities of social protection actors and the sensitisation of community leaders through the training of 34 health workers and 24 community relays on sexual and reproductive health and gender-based violence, as well as the training of 540 teachers (including school administrators and collaborators) on the rights of indigenous peoples to reduce discrimination against indigenous children in schools. In collaboration with the Departmental Directorate of Agriculture, 22 groups (16 planned - 137%) 19 indigenous farming groups and 3 groups of young palm oil producers supported to enable the supply of palm oil to the soap cooperative of indigenous peoples have benefited from formative supervision (mentoring and coaching) to sustain the achievements of the training in management, structuring and small-scale accounting. In addition, the programme has distributed small agricultural equipment, and 43 oil palm producers have been trained in soap production. Regarding health, with the second round of the polio vaccination campaign targeting children aged 0-59 months, 98 percent vaccination coverage was recorded. Out of a total of 28,683 children vaccinated, 3,029 children were indigenous (10.5 percent).

Result 1: Integrated multi-sectoral policies to accelerate the achievement of the SDGs are put in place

Estimated rate of completion as of 31 Dec 2021: 75%

Result 2: Indigenous peoples and other vulnerable populations in Lékoumou have increased access to inclusive and quality education, health care packages and essential services, as well as social protection to strengthen human capital and improve social and professional integration within an appropriate legal framework.

Estimated rate of completion as of 31 Dec 2021: 75%

Result 3: Indigenous peoples and other vulnerable populations in Lékoumou are implementing diversified and sustainable economic activities, generating employment and income in sustainable agriculture, food security and ecotourism while respecting the environment.

Estimated rate of completion as of 31 Dec 2021: 70%



I. Overall progress and priority, cross-cutting issues

This report sets out the progress made in implementing the joint programme in the period from February 2020 to 31 December 2021

I.1 Context and the overall approach

Ensuring an adaptive and strategic JP

- The appointment of the new Minister of Social Affairs and Humanitarian Action, led to a change in the Departmental Director of Social Affairs (President of the Secretariat of the Technical Coordination Committee) and the members of the Steering Committee at the national level, which led to the new Minister's request to extend the project until June 2022.
- Restrictive measures adopted by the government to prevent the spread of the Covid-19 pandemic caused the suspension of activities planned during the year 2020 and their postponement to 2021.
- Consequently, the SDG programme results framework was updated and extended until June 2022. The work plan also underwent modifications by modifying the intervention strategies.
- The Joint programme ensured the coordination between UN agencies through the UNCT, the programme team and establishing synergies between UN agencies with similar interventions in the same area of intervention.

Link with UNDAF/ UNSD Cooperation Framework

- The joint programme seeks to improve access to inclusive, quality education and essential health care services as well as improve protection and social integration of indigenous population through the provision of birth certificates, diversified and sustainable economic activities, food security. These objectives are linked to three of the four UNDAF outcomes. Consequently, the various actions put in place to bring about changes in the different sectors and services (health, education, social rights, and legal protection) with a view to improving access to social protection and thus improving the living conditions of vulnerable populations, particularly indigenous peoples, have also indirectly contributed to the achievement of the UNDAF results and outputs.
- The programme is in accordance with the programming framework of the Sustainable Development Goals, the Republic of Congo's National Development Plan (NDP 2018-2022) and the African Union's Agenda 2063. Besides, the programme is aligned to the UN system's UNDAF 2020-2024 that has a programmatic operational stratification of the SDGs that should enable to respond favourably and effectively to the support requested by the Congo through this programme.

COVID-19 impact

The restrictive measures (containment strategies, travel restrictions and poor service delivery) to contain the pandemic has negatively impacted the programme. The lack of human and material resources was the main constraint. Nevertheless, the joint programme contributed with the efforts to limit the spread of the Coronavirus pandemic through advocacy activities performed to sensitise the programme's target beneficiaries. In this same perspective, for the school year 2020/2021, the departmental health directorate and the departmental primary education directorate disinfected classrooms in Sibiti. In this district, 114 classrooms were disinfected, benefiting 27 745 pupils, including 13 430 girls (35 %) of all the schools in Sibiti. In addition, other actions were carried out, including advocacy activities to promote the inclusion of indigenous people in the government's response to the Covid 19 pandemic.



I.2 Update on priority cross-cutting issues

UN Development System reform - UN coherence at the country level

Based on the UNDAF programme, the Government of the Republic of Congo and the UNCT have embarked on a joint programming cycle covering the period 2020-2024 through the United Nations Development Cooperation Framework (UNDAF 2020-2024). Its formulation was carried out through a highly participatory process involving government stakeholders, the UN system, non-governmental organisations, the private sector, and other development partners:

- In line with the Paris Declaration on Aid Effectiveness and the Accra Agenda for Action, this Plan is aligned
 with the three development priorities of the Congo as defined in the strategic axes of the National
 Development Plan (NDP 2018-2022), governance, human capital and economic diversification. It also
 serves as a channel for implementing international commitments to the Sustainable Development Goals
 and other principles governing international development cooperation.
- This Plan benefit from a positive context of strengthening reforms to reposition the United Nations. These
 reforms aim to strengthen the effectiveness, efficiency, and relevance of the UN's operational activities to
 ensure optimal implementation of the Sustainable Development Goals (SDGs) by 2030.
- The plan seeks to strengthen the nexus between development and humanitarian action, highlighting the
 organisation's new dynamic of linking emergency humanitarian action to development. Such an approach
 will enable Congo to better respond to its multifaceted challenges in a sub-region affected by humanitarian
 crises.
- The Resident Coordinator and the Heads of Agency of the United Nations System in the Republic of Congo are committed, through this United Nations Development Assistance Framework (UNDAF), in accordance with the new guidelines and instructions of the United Nations reform, to combining their efforts to achieve the objectives of sustainable development, through alignment with the development priorities of the Republic of Congo.

It is within this framework that the SDG Fund joint programme contributes, in terms of implementation periodicity, to the achievement of the Sustainable Development Goals (SDGs) defined in relation to access to social protection and the improvement of living conditions of vulnerable populations, particularly indigenous populations.

Going beyond "business as usual" to produce catalytic results at scale

To catalyse the results in the UNDAF, the SDG programme has built on the core SDGs in line with the National Development Plan (ND 2018-2022) and the UN Cooperation Framework (UNDAF 2020-2022). Those SDGs have been selected as accelerators of the entire SDGs to bring about significant changes through this programme by combining actions that will improve governance and the performance of local institutions (capacity building, social protection services). Moreover, the human rights advocacy, for the effective implementation of Law 05/2011 on the promotion and protection of the rights of indigenous peoples and the community awareness and involvement through indigenous organisations/associations and networks has produce catalytic results to the indigenous populations through capacity building of social protection actors and beneficiaries.

SDG acceleration

This joint programme focuses on Sustainable Development Goals 1, 2, 3, 4, 5, 8, and 10 based on those selected by Congo in its NDP (2018-2022) and included in the United Nations cooperation framework, which will contribute indirectly to the other SDGs.

Target 1.3 of SDG 1: social protection coverage for all, including the poor and vulnerable:

Actions have been carried out at national and local levels to create an enabling environment for social protection for the poor and vulnerable.



The organisation of an advocacy workshop bringing together government actors representing all ministerial sectors, development partners as well as civil society and indigenous organisations at national level to promote the effective implementation of law 05/2011 on the rights of indigenous populations.

Five awareness-raising sessions have been organised in the five districts of Lékoumou (Sibiti, Komono, Zanaga, Mayeye, Bambama). In Lékoumou 199 people were made aware of the SDG Fund project and the rights of indigenous people including local authorities, village chiefs, teachers, health workers, land chiefs, judicial authorities, the gendarmerie, the army, and the police (actors responsible for implementing the law).

To contribute to the population's access to quality health services and increase demand and contribute to the reduction of chronic malnutrition and maternal and infant deaths:

- 32 health workers from 16 health centres and 34 community relays in the two health districts of Sibiti and Zanaga in the Lékoumou department were trained in Integrated Management of Adolescent and Adult Illness (IMAI) and gender-based violence.
- 5 health centres in the Zanaga health district were provided with 4 tons of nutritional supplements for the prevention and treatment of malnutrition.
- 474 vulnerable people were screened for malnutrition. Among those, 222 vulnerable people, including 93 children aged 6-59 months (50 girls) and 129 pregnant and lactating women, benefited from nutritional supplement (supercereal CSB+) in the health centres of the Zanaga health district, for the treatment and prevention of malnutrition.

To promote access to education and reduce the school dropout rate, the school feeding programme has integrated people from indigenous origin into the school feeding programme. Also, teaching staff was sensitised on the content of the law 05/2011 on the rights of indigenous populations.

Target 1.4 and target 2.3: (which is linked to SDGs 10, 5.2, 8.7, 10): To help accelerate food security, hunger reduction, and ensure food for all and reduce malnutrition:

In 2021, the SDG programme supported 16 indigenous groups and 3 vulnerable Bantu groups in setting up incomegenerating activities, through capacity building for those 19 groups in management and structuring, by providing 2 117 kits of farming equipment, and seeds (maize, cassava cuttings) Additionally the programme supported 3 palm oil production groups, comprising of 33 indigenous youth (21 men, 12 women) and 10 Bantu youth (6 men, 4 women).

All the basic target of the SDGs are interconnected and can lead to the achievement of the other SDGs.

Policy integration and systems change

- Through the establishment of a representative and participatory coordination mechanism at the local level, in particular the technical coordination committee with representatives of several key departmental directorates under the chair of the prefect (social affairs, agriculture, land, decentralisation, fisheries, etc.), which benefited from technical and operational capacity building. The reinforcement of the operational capacities of the decentralised actors, notably through the provision of computer tools and internet access to all the 6 departmental directorates in Lékoumou.
- The project has also set up an advocacy process to strengthen the capacities of the inter-ministerial committee bringing together all the key ministries in charge of monitoring and evaluating the implementation of indigenous issues to strengthen inter sectorality and coherence in ministerial interventions on indigenous issues and thus promote the effective implementation of the law 05/2011 on the rights of indigenous populations and the national action plan on improving the quality of life of indigenous populations. Thus enabling indigenous people to have access to basic social services and social protection.



Contribution to improvement of the situation of vulnerable groups

The SDG programme has supported through capacity building and provision of equipment:

- 22 groups (19 groups of 213 small agricultural producers (114 women), including 16 groups of small indigenous agricultural producers, and 3 groups of young palm oil producers supported to enable the supply of palm oil to the soap cooperative of indigenous created by UNFPA in Sibiti)
- 95 members of the 19 groups, including 53 women, were trained.
- Awareness-raising on land rights and access to basic social services (Law 05/2011 on the rights of indigenous populations) for 121 vulnerable indigenous and Bantu people, including indigenous associations.

For the treatment and prevention of malnutrition:

- 1 240 vulnerable people benefited from treatment et prevention of malnutrition, including 347 children aged 6 months to 5 years, of whom 197 were girls and 148 boys.
- 337 pregnant and breastfeeding women received nutritional supplement (supercereal CSB+) for the treatment of malnutrition.

The programme has contributed to the improvement of the situation of vulnerable groups for a total number of 1 453 vulnerable, including 451 women and girl (31 %)

Mainstreaming Gender equality and women empowerment

The programme contributed to the promotion of gender equality and equity throughout the implementation of the project, including identification, design, implementation, budgeting, monitoring and evaluation. This was reflected in:

- the strong participation of women and women's organisations in the implementation bodies, notably the technical coordination committee and the steering committee (67 %).
- A particular emphasis on empowering indigenous women through the support of nearly 80% of women's groups.
- Positive discrimination in the identification/selection of beneficiaries with particular emphasis on women's groups
- Data collection in the SDG framework considered the disaggregation of data by sex.

Estimated percentage of overall disbursed funds spent on Gender equality and Women empowerment by the end of 2021: 25 %.

Human rights

The joint SDG Fund programme has also served as a channel for the implementation of international human rights commitments.

The SDG programme organised awareness-raising sessions for 199 people in the five districts of the Department of Lekoumou, to address prejudice and discrimination. These sessions targeted the actors responsible for implementing the laws, local and judicial authorities, police officers, gendarmes, army, village chiefs, landowners, teachers and health workers, and the indigenous populations.

Similarly, the organisation of an advocacy workshop bringing together 50 actors from different key ministries, with the participation of indigenous organisations, in June 2021 at national level to enable the effective implementation



of Law 05/2011 on the promotion and protection of the rights of indigenous peoples in Congo, as well as the United Nations Declaration on the Rights of Indigenous Peoples.

These activities are in line with the "International Convention on the Elimination of All Forms of Racial Discrimination" and the "United Nations Declaration on Indigenous Peoples", and the Law 05/2011 on the Promotion and Protection of the Rights of Indigenous Peoples.

Partnerships

The SDG programme is implemented involving actors from the government, the UN system under the leadership of the Resident Coordinator, non-governmental organisations, indigenous associations, the private sector and other development partners, thus enabling the strengthening of coordination between UN agencies through the UNCT, the programme team and the establishment of synergies between UN agencies with similar interventions in the same region.

Civil society and indigenous organisations, RENAPAC, which is very close to indigenous communities, acted as an operational partner to involve indigenous communities in the development effort that directly concerns them and, in the monitoring and evaluation of the implementation of the SDG programme. These partnerships were formalised through the signing of a FLA (field agreement) and a Memorandum of Understanding (MoU).

Mobilising additional funding and/or financing

- Additional funding has been granted by USDA, Japan and the Government of Congo for supporting the school feeding programme of the programme and ensuring sustainability and continuity of the programme.
- Germany supported the implementation of a nutrition programme for the prevention and treatment of malnutrition, providing training to health workers and local communities to ensure local women trained groups to implement this programme close to the communities.
- The UNCT is drafting a second joint programme in order to mobilise additional funding to continue supporting indigenous communities in other areas of the country.

Strategic meetings

Type of event	Yes	No	Description/Comments
Annual JP development partners'/donors' event*	⊠Error! Bookmark not defined.		Organisation of the advocacy workshop on the effective implementation of Law 05 on the rights of indigenous peoples, which brought together ministerial authorities, development partners and indigenous organisations
Steering committee			The steering committee was held on August 2021, with the presence of the Ministry of Social Affairs and Humanitarian Action. In this meeting, it was agreed to request the extension of the activities until June 2022.
Technical committee			Regular technical committees are held in the Lékoumou department to follow the implementation of the activities. These technical committees are led by the chairwomen of the Lekoumou.

Innovation, learning and sharing

The learning and experience sharing platform was built around the inclusive and project-specific national steering committee, under the leadership of the Ministry of Social Affairs and Humanitarian Action, bringing together all stakeholders including government, civil society, and indigenous organisations. The steering committee met once in 2021.

The technical coordination committee, chaired by the Prefect of Lékoumou, has been the platform for sharing and exchanging experience at the local level. It met once a quarter to review the implementation of activities and refocus interventions.



II. Annual Results

Overali	progress
	☐ On track (expected annual results achieved)
	☐ Satisfactory (majority of expected annual results achieved)
	☐ Not-satisfactory (majority of expected annual results not yet achieved)
	Please, explain briefly:

According to the results framework and considering the implementation situation of the joint programme in 2020 with all the constraints related to the covid-19 pandemic, during the year 2021, the efforts made by the implementing partners have made it possible to achieve on average the expected results, as indicated in the results framework (see Annex 1 and 2).

Contribution to Fund's global results

⇒ Contribution to Joint SDG Fund Outcome 1

Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

This programme has contributed to the implementation of multisectoral policies aimed at ensuring the fundamental rights of indigenous people in the Republic of Congo:

Through activities such as the advocacy for the integration of indigenous people in ministerial programmes (law 05/2011) and the organisation of workshops to set up the management committee of the Sibiti health district reference hospital, the joint programme is establishing cross-sectoral and innovative approaches to address the gap in the national social protection system for the indigenous population. These activities leverage the comparative advantages of the PUNOs that implement the joint programme.

These types of activities also support the capacity development by expanding social protection coverage to the indigenous population living in the Lekoumou department, reaching those otherwise will be left behind (especially women, children, and smallholders depending on the informal market).

All the activities that sensitize policymakers and governmental staff, are implemented with the objective of leveraging the necessary resources (budget) and strong involvement of the government to protect indigenous population.

 Indigenous and other vulnerable populations in Lékoumou have increased access to inclusive and quality education services, essential health care packages and services, and social protection to strengthen human capital for better social and professional integration within an appropriate legal framework.

The Joint programme emphasised on the improvement of the quality of health and education services by providing capacity training, financial support, and equipment to the social agents. Along with capacity strengthening, integrated social activities also contribute to this outcome: school feeding, health, and nutrition.

This programme is also implementing innovative solution such as support to palm oil farmers in processing oil into soap with the objective of increase the incomes of these smallholders' association. Besides, the joint programme implementing Social and Behaviour Change Communication (SBCC) campaign where 199 people were made aware of the project's operating mechanisms in the communities covered by the local radio (synopsis, communication



plan and radio programme). The programme has contributed with the implementation of integrated policies: such as the school feeding programme, vaccination campaigns, and ensure access to health.

JP Outputs and Outcomes

Outcome 1: Integrated multisectoral strategies to accelerate the SDG.

- To promote the successful implementation of Law 05 and the national action plan on enhancing the quality of life of indigenous people, 23 social affairs employees have been educated in social work techniques.
- In the Lékoumou department, a prefectorial decree creating the project management bodies and the Technical Coordination Committee for Social Protection was signed.
- 18 social workers and 78 community relays have been trained to implement the child protection project
- Four NGOs (Espace OPOKO, AAPA-SEDD, CAPV, and ASEP) received technical assistance to improve their project management and monitoring skills.
- 6 departmental directorates received equipment and connectivity to ensure their effective contribution to the programme implementation.
- To promote the project and indigenous land rights 199 persons, including local officials, village heads, elders, land chiefs, indigenous and Bantu groups were targeted in five sessions in Lékoumou (Sibiti, Komono, Mayeye, Zanaga and Bambama).
- On August 9th 2021, advocacy activities were held in Zanaga and Komono districts with 50 local officials, human rights organisations, and indigenous community members. These activities aimed to promote and defend indigenous peoples' rights, children's rights, and the status, protection, and promotion of people with disabilities.
- The enumeration campaign identified 4,288 households, including 2,925 indigenous households, 1,276 vulnerable Bantu households, and 87 mixed (Bantu and indigenous) households.
- 50 community leaders including 5 indigenous leaders and eight (08) community intermediaries were trained in sensitization to promote the health service demand by households.
- Establishment of management bodies for the Sibiti health district Health committees (COSA) and Management committees (COGES) of the referral hospital
- 16 members of the SIBITI Health District Management Committee have been formed to appropriate their mandate at the level of the said committee.
- 6 focus groups (2 women, 2 men, 2 teenagers) organized in Mayeye and Komono bringing together 210 people, 40% of whom are indigenous, on the proper use of health services. Reasons cited for better utilization include financial, hospitality and quality of care reasons due to the lack of qualified agents. 85% of health personnel are community workers

Estimated completion rate by 31 December 2021: 75%.

Outcome 2: Indigenous and other disadvantaged communities in Lékoumou have improved access to quality education, health care, critical services, and social protection to build human capital and promote social and professional integration. The completion rate by December 31, 2021, was 70%.

- The school canteen initiative has reduced indigenous dropout rates by 14%. (From 59 percent in 2020 to 45 percent at the end of 2021).
- For the 2020-2021 school year, 2 152 indigenous children (1 016 girls and 1 152 boys) enrolled in primary schools. The school drop-out rate for indigenous children stood at 12.47 % (14.14 % for girls).
- In the districts of Sibiti, Mayéyé, and Komono, there are 1 223 indigenous children enrolled in school for the 2020-2021 school year, including 576 girls (47%)
- 1 523 indigenous pupils with school kits, including 751 girls and 3,722 indigenous children have been registered with the civil registry in late births declaration in the districts of Sibiti, Mayéyé, Komono, Zanaga, and Bambama.
- Birth certificates were provided to 202 people (84 girls 41.05 %) in Sibiti by the child protection committee.
- 6 integrated Health Centres (IHCs) in the Zanaga health district (MBOMO, Kengue, Yomi, Zanaga centre, Leweme, Mbambama) have received 44.98 MT of nutritional supplements to help prevent malnutrition.



- 252 people were checked for nutritional status. These included 220 children aged 0-59 months and 32 pregnant and breastfeeding women.
- Therapy of malnutrition helped 188 vulnerable persons, including 89 children aged 6-5 years, 50 girls and 39 boys; 129 pregnant and lactating mothers received nutritional supplement (supercereal CSB+) for malnutrition prevention and treatment.
- 114 classrooms in 18 schools, were disinfected, benefitting 27,745 schoolchildren (13,430 girls).
- 1 349 individuals were made aware of the project via the communication for social and behavioural change CCSC initiative in the communities served by local radio (synopsis, communication strategy, and radio programme).
- 98% vaccination coverage was recorded during the second polio vaccination campaign this year targeting children aged 0-59 months. Of a total of 28,683 vaccinated children, 3,029 indigenous children.
- 216 advanced and mobile strategies have been carried out by the 24 health areas of the two health districts since the beginning of the year to provide health care
- The advanced and mobile strategies made it possible to vaccinate 3 238 children with penta 3, including 549 indigenous children out of the 4 048 expected (79.9%)
- 2,578 doses of tetanus vaccine were administered to women, including 441 to indigenous women. In addition, 932 children, including indigenous children, received the first dose of vitamin A and 470 the second dose.
- 832 antenatal consultations, including 142 to indigenous women, were carried out during the year.
 However, ANC coverage is still low (less than 50% for the whole department); even less so for the indigenous population
- 8,113 children aged 0 to 5 years, including 2,639 indigenous children, received vitamin A supplements and systematic deworming
- 170 political, administrative, security and local authorities, including indigenous people, in the five administrative districts were made aware of the project through visits organised in each administrative district.
- 23 health workers, 23 members of the Health Committee (COSA) and 10 members of the health district management teams were trained in the community activity package.
- 50 community leaders including 5 indigenous leaders and eight (08) community relays have been trained in sensitisation to encourage the provision of services in households.
- 6 focus groups (2 women, 2 men, 2 adolescents) organised in Mayeye and Komono involving 210 people, 40% of whom were indigenous, on the proper use of health services.
- From November to December 2021, 15 natives were treated in hospitalization, among them, 5 (4 men and 1 woman) in medicine, 3 (1 boy and 2 girls) in paediatrics, 2 men in surgery and 5 women in maternity / also, three (03) surgical kits were provided by the project for better management of two (02) surgical patients and a caesarean section.
- 3 pharmaceutical products were provided to all hospitalized patients for their care, as well as 3 meals a day were served to patients as well as their daily sick care, throughout the stay to the hospital.
- A layette kit was provided to each baby born as well as two (2) loincloths given at each birth, to stimulate hospital deliveries and thus reduce complications likely to lead to maternal deaths.

Estimated completion rate by 31 December 2021: 75%.

Outcome 3: Indigenous and other disadvantaged groups in Lékoumou create jobs and income in sustainable agriculture, food security, and ecotourism while preserving the environment.

• 22 groups out of 16 planned (137.5%) were formed and their capabilities strengthened in agriculture, 19 indigenous agricultural groups received training, help for structure, and formative supervision (monitoring and supervision of the groups) from the Departmental Directorate of Agriculture.



- 240 hoes, 240 axes, 145 files, 34 wheelbarrows, 240 machetes, 240 rakes, 32 decametres, 320 boots, 320 mackintoshes, 32 scales have been provided.
- 213 persons, including 50 vulnerable Bantus and 114 women, have income-generating activities with the distribution of 13,100 enhanced cassava cuttings (to prevent mosaic disease).
- In Sibiti, Komono, and Mayéyé, three palm oil production groups comprised of 33 young indigenous people (21 men, 12 women-36%) and 10 young Bantu (6 men, 4 women-67%) were trained in group structure. The goal is to offer palm oil and, in Sibiti, homemade soaps to local indigenous cooperatives. This will increase local revenue, eliminate poverty, and restore dignity.
- Indigenous communities have acquired and made accessible 20.71 hectares of land for activities that will produce money once mature.

Estimated completion rate by 31 December 2021: 70%

Monitoring and data collection:

- The organisation of 3 fields visits by the heads of the agricultural sectors to monitor, supervise, and support the 19 indigenous and Bantu agricultural groups.
- Organisation of field visits in hospital centre to monitor, supervise and support 5 health centres of Zanaga, which are provided with nutritional inputs for the treatment of malnourished people.
- The organisation once every three months of meetings of the technical secretariat and the technical coordination committee, chaired by the Prefect of Lékoumou, to review the implementation of activities and refocus interventions.
- The organisation of the steering committee in the month of August 2021 in Brazzaville to review the activities.
- The organisation of periodic meetings (one per month) of all UN agencies with the UNCT to monitor the progress of activities.
- The organisation of a joint field visit in October 2021 with the UN coordination under the UN Resident Coordinator in Congo, all agencies, and the Resident Coordinator in Lékoumou to monitor activities.
- The organization of the departmental workshop of presentation and validation of data from the campaign to enumerate indigenous populations in the Department of Lékoumou.
- A guarterly report was submitted on the progress of activities.

Lessons learned and sustainability of results

- The integrated health centres are in most cases far from the indigenous villages. This does not always
 encourage the use of these centres. Also, since the indigenous people only go to the IHCs when they have
 no other recourse at their level. It is therefore necessary to strengthen awareness-raising activities within
 the communities to encourage them to attend these health centres and to promote the use of the mobile
 strategy to support the malnutrition activity.
- The mobilisation and sensitisation of local authorities, including village chiefs, has led to their strong involvement in the implementation of the programme's activities. The mobilisation and sensitisation of local authorities, including village chiefs, led to their strong involvement in the implementation of the programme's activities, as it was noted that the local authorities were strongly committed to supervising and accompanying the beneficiaries. This has contributed to facilitating the adhesion of the communities in the activities of the SDG Fund programme.
- As long as the child protection committees have not been set up in all the localities of the department of Lékoumou, their involvement in the implementation of social protection activities in the areas where they exist should be capitalised on with a view to sustaining the achievements of the joint programme.



III. Plan for the final phase of implementation

Towards the end of JP implementation

Outcome 1: Integrated multisectoral policies to accelerate the achievement of the SDGs are implemented with increased scope and scale.

The period from January to June 2022 will be dedicated to the reinforcement of the activities put in place in 2021, which will be implemented to achieve 100% of the results expected by the SDG programme. These include the following activities:

- Launching the process of the law on Child Protection Committees.
- Promoting the cross-cutting community strategy through the CPEs.
- Continue advocating for the inclusion of indigenous specificities in ministerial programmes to contribute
 to improving access to basic social services and land, and thus accelerate social protection coverage for
 all, especially for vulnerable populations and specifically for indigenous people. To enable the integration
 and ownership of the programme by the government.
- Continue strengthening awareness-raising activities among communities on their rights and other issues
 to promote behavioural change and reduce discrimination and exploitation of indigenous people by the
 Bantu actors responsible for implementing the laws.

By June 2022, this expected result is estimated at 100%.

Outcome 2: Indigenous and other vulnerable populations in Lékoumou have increased access to inclusive and quality education services, essential health care packages and services, and social protection to strengthen human capital for better social and professional integration within an appropriate legal framework.

Through the implementation of the following activities, the living conditions of the populations of the Lékoumou department, especially the indigenous populations, will be improved:

- School monitoring through community leaders in collaboration with school inspectorates in the three target districts (Sibiti, Mayéyé and Komono).
- Monitoring the finalisation of the civil status process, in particular the entry and signing of requisitions for late declaration of births, transcription, signing, lamination, and distribution of birth certificates.
- The revitalisation and scaling up of Child Protection Committees in the other four chief towns of the subprefectures (Zanaga, Mayéyé, Komono and Bambama).
- The organisation of awareness campaigns on violence against children by the child protection committees.
- The organisation of awareness campaigns and data collection in indigenous communities on Essential Family Practices (EFP) and Gender Based Violence (GBV) in the 3 districts.
- The development of the mapping of at least 10 water points in schools/community settings and ensure awareness raising actions on good WASH practices.
- The organisation of a workshop at national level to present and validate the census of indigenous and other vulnerable children.
- The organisation of a capitalisation and experience sharing workshop that will bring together government
 actors, CSOs, development actors, sub-regional networks (REPALEAC), COMIFAC, indigenous people, and
 the achievements of the SDG Fund Lékoumou project to share the experiences generated by this
 programme after the evaluation, and see to what extent these experiences can influence the planning of
 the 2022-2024 NDP (integration of indigenous specificities in ministerial programmes) to accelerate the
 achievement of the SDGs and the effective coverage of social protection for the vulnerable, particularly
 indigenous populations, by 2030.



Outcome 3: Indigenous and other disadvantaged groups in Lékoumou create jobs and income in sustainable agriculture, food security, and ecotourism while preserving the environment

- Strengthening support for the establishment of income-generating activities for indigenous groups by
 providing them with processing equipment and helping to promote their products to enable them to have
 access to the market and to promote food security and the provision of equipment.
- Continuing to build the capacity of social protection actors through support and training supervision and the provision of equipment (teachers, health workers, social services, etc.).
- Monitoring by strengthening the supervision of 19 indigenous groups and 3 palm oil production groups.

To ensure sustainability: through advocacy, the SDG programme will lead the government to consider indigenous-specific issues in the budgeted ministerial programmes (of key ministries) to allow for the continuity of the implementation of actions set up by the SDG programme in favour of the indigenous populations of Lékoumou and the financing of the national action plan for indigenous populations.

The opportunity remains in the revision of the Congo's national development plan (2018-2022). The experience of the integrated SDG programme implemented in Lékoumou could be used in the revision of this national development plan.

During the final phase of implementation, the final evaluation of the social protection programme for the indigenous populations of the Lékoumou department "Joint SDG Fund programme" will be rollout.

Risks and mitigation measures

Lies in the uncertainty of Congo's economic situation linked to the fall in oil prices exacerbated by the Covid-19 health crisis Congo's economic status as a middle-income country may be an obstacle to the mobilisation of additional funds.

- The problem of leadership between institutions involved at the local level is a matter of concern in the implementation of the joint programme.
- Diversion for other purposes of goods and funds intended for indigenous people in national institutions donated under the SDG Fund programme to strengthen the social protection system in Congo.

Mitigation measure:

- Turn to the private sector for fundraising.
- Organise a meeting to discuss the situation and find a solution together with the members of the technical coordination committee
- Strengthen monitoring at the level of local institutions benefiting from the SDG Fund programme.

Annex 1: Consolidated Annual Results.

1. JP contribution to global Fund's programmatic results

Global Impact: Progress towards SDGs

Select up to 3 SDG *indicators* that your Joint Programme primarily contributed to (in relation to SDG targets listed in your JP ProDoc)

SDG 2: Zero Hunger SDG 4: Quality Education

SDG:3: Good Health and well-being

Global Outcome 1: Integrated multi-sectoral policies to accelerate SDG achievement implemented with greater scope and scale

Outcome indicators	Expected 2021 target	2021 result	Reasons for variance from planned target (If any)	Expected final target				
1.1: Number of integrated multi-sectoral policies that accelerated SDG progress in terms of 1 1 2 2 scope ¹								
List the policies: Organisation of a national advocacy workshop which resulted in the adoption of a roadmap to strengthen national coordination in implementing the law 05-2011 of the 25 February 2011 (provisions of indigenous people's social protection improvement								
1.2: Number of integrated multi-sectoral policies that accelerated SDG progress in terms of scale ²	1	1		1				
List the policies: - Implementation of Law 05-2011, on access to social protection for indigenous people.								

Global Output 3: Integrated policy solutions for accelerating SDG progress implemented

Output indicators	Expected 2021 target	2021 result	Reasons for variance from planned target (If any)	Expected final target
3.1 Number of innovative solutions that were tested (disaggregated by % successful-unsuccessful)	1	1	Covid-19 Preventive measures includes: 18 schools benefited from disinfection, for 114 classrooms covering a total of 27,745 students, including 13,430 girls	1
3.2: Number of integrated policy solutions that have been implemented with the national partners in lead	1	1		2

Two workshops were organised through the Departmental Council for the establishment of the management committee (COGES) of the Sibiti health district reference hospital

Did your Joint Programme contrib	buto to strongthoning of not	tional capacities to implem	ant integrated cross sectoral
Did your Joint Programme Contin	bute to strengthening of hat	tional capacities to implem	siit iiitegrateu, cross-sectorar
SDG accelerators in 2020-2021?			
☐ No			
Explain briefly:			

Capacity strengthening training and equipment provided to social protection agents from the different sectorial departments (health, Education, Social affair, Women promotion, agriculture, in the Lekoumou region.

¹Scope=substantive expansion: additional thematic areas/components added, or mechanisms/systems replicated.

²Scale=geographical expansion: local solutions adopted at the regional and national level, or a national solution adopted in one or more countries.



2. Results as per JP Programmatic Results Framework

Result / Indicators	Baseline	Expected 2021 target	2021 Result	Reasons for variance from planned target (If any)	Expected final target
Outcome 2: Indigenous peoples care packages and essential se appropriate legal framework.					
Outcome 2, indicator 1: Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable (Proportion of population with access to basic services)	At least 50% of indigenous populations (girls/boys, women/men, children/youth/adults) in the intervention areas have an improved standard of living	70% of the population lives in households with access to basic services	Final evaluation	N/A	Final evaluation
Outcome 2, indicator 2: Maternal mortality rate (indigenous vs Bantou)	436/100 000 (national)	349/100 000 Maternal mortality rate	276/100 000	Calculated from available hospital data	276/100 000
Outcome 2 indicator 3: School achievement rate (disaggregated by sex, indigenous vs Bantou)	Indigenous 59.78 with girls 40.2% (91% nationally)	Indigenous 80% with girls 70% academic success	50% success rate of children in Lékoumou, especially girls (the 2020-2021 school year is nearly at 50% of success rate compared to 39.11% in 2019-2020)	The main causes of the non- achievement of the objectives are related to the effects of the pandemic in Covid-19 with the closing of classes	55%
Output 2.1: The indigenous and	other vulnerable peoples	have access to effectively us	se, and demand for appropriate	social protection c	overage
Output 2.1. indicator 1: Percentage of women benefiting from pre-natal consultation (Indigenous vs Bantou)	TBD	50% of indigenous women receiving antenatal consultation	33% (2,829) femmes have benefited from pre-birth consultation, including 966 Indigenous Population	Calculated from available hospital data	50%
Output 2.1 indicator 2: Neonatal mortality rate (disaggregated by sex, indigenous vs Bantou)	52/00 (national)	20/00 neonatal mortality	13.8% neonatal mortality	Calculated from available hospital data	13.8% neonatal mortality
Output2.1. indicator 3: Vaccination coverage of children U5 (disaggregated by sex, indigenous vs Bantou)	75% in DTP3 at national level 51% for indigenous people	80% for indigenous people	80% U5 vaccinated in DPT3	Calculated from available hospital data	80%
Output 2.1 indicator 4: Prevalence of stunting among children under 5 years of age (by sex), indigenous people /Bantou	21% of stunted of growth (national) 40% stunted indigenous	30% reduction in the prevalence of stunting in Indigenous children under the age of 5	45.3%	The high rate of stunting can be explained by a high presence of Indigenous People in the Lekoumou (28%) with a very poor diversified diet and the poor practice of ANJE and the lack of follow-	45%



				up of the first 1000 days	
Output 2.1 indicator 5: Abandon rate (disaggregated by sex, indigenous vs Bantou)	Indigenous 40.22% with girls 59.80% (9% nationally)	Reduce dropout rate by 40%	The dropout rate of indigenous students has been reduced by 15% (from 59% in 2020 to 45% in 2021)	School feeding program in the Lekoumou region	At least the 45% or Less
Output 2.1 indicator 6: Proportion of women and girl subject to a certain form of violence (sexual, physical, psychological) the last 12 months disaggregated by form of violence and by age (indigenous Vs Bantou	TBD	Reduce by 40% the proportion of women and girls who are victims of some form of violence (sexual, physical, psychological, etc.)	Study on GBV was carried out in late 2021. Result will be available in the quarter of 2022	NA	Reduce by 40% the proportion of women and girls
Output 2.1 indicator 7: Number of sensitizations on SBCC	TBD	Achieve 80% awareness coverage on SBCC	90% coverage of SBCC	Organisation 114 community meetings in the 114 villages and 26 neighbourhoods of the commune of Sibiti and the urban communities 50 authorities from 30 ministries sensitised on the law 05-2011 of the 25 February 2011 on indigenous people 540 schoolteachers sensitised on the rights of indigenous people 155 locals' authorities' landowners and communities from Lékoumou sensitised on land acquisition rights and on law 05 on the rights of indigenous people 1,150 people were educated on the project's operational mechanisms in the	Achieve 80% awareness coverage on SBCC



			communities covered by the local radio	
		and the technical and operatio	nal capacities of dec	concentrated
NO	25% social protection actors trained (Teachers, health workers, social workers)	488 social protection actors (428 investigators and 60 supervisors), of which 48 women are trained, for a coverage of 96%. 32 health agents trained, including 12 women	Training activities report of the DDAS (23 new primary schools integrated in the school canteens program with the contribution of the Joint Program, the capacity of their teachers strengthened)	Final Assessment
NO	12 community leaders trained on GBV and SBCC (40% of women)	140 community leaders have been sensitised and trained in gender-based violence and SBCC 34 health workers and 24 community lay-workers on sexual and reproductive health and gender-based violence (GBV).	Each organization has trained different community leaders in GBV	Final Assessment
ed beneficiaries is establi	shed, and they have access	to civil status documents		
Less than 50% of Indigenous children have a birth certificate (81% nationally)	85% of indigenous children have a birth certificate	202 birth certificates were delivered to indigenous children (41.6% girls) and 3,722 birth certificates in the process of being delivered	The unavailability of the actors to be involved, the heads of the judicial services, especially the Public Prosecutor of the TGI of Sibiti.	3 722 children
			conomic activities, c	reating jobs and
36.9% prevalence of food insecurity at the ministerial level (National Level)	Reduce the prevalence of food insecurity by 10%	35.5% of Congolese households are food insecure among which 50.3% in the Lékoumou region	Limited number of people particularly in the indigenous community have income generating activities and due to climate change, their natural habitat, their source of livelihood (forest) is	Reduction of the prevalence of food insecurity by 10%
	NO Less than 50% of Indigenous children have a birth certificate (81% nationally) and other vulnerable popule agriculture, and have to food insecurity at the ministerial level	NO 25% social protection actors trained (Teachers, health workers, social workers) 12 community leaders trained on GBV and SBCC (40% of women) Less than 50% of Indigenous children have a birth certificate (81% nationally) 85% of indigenous children have a birth certificate (81% nationally) 86.9% prevalence of food insecurity at the ministerial level Reduce the prevalence of food insecurity and ecotourism	NO 25% social protection actors (428 investigators and 60 supervisors), of which 48 women are trained, for a coverage of 96%. 32 health agents trained, including 12 women 12 community leaders trained on GBV and SBCC (40% of women) 140 community leaders trained and seven and SBCC 34 health workers and 24 community lay-workers on sexual and reproductive health and gender-based violence (GBV). ed beneficiaries is established, and they have access to civil status documents Less than 50% of Indigenous children have a birth certificate 85% of indigenous children have a birth certificate (81% nationally) 85% of indigenous children (41.6% girls) and 3,722 birth certificates in the process of being delivered 36.9% prevalence of food insecurity at the ministerial level (National Level) Reduce the prevalence of food insecurity at the ministerial level (National Level) Reduce the prevalence of food insecurity at the ministerial level (National Level) Reduce the prevalence of food insecurity at the ministerial level (National Level) Reduce the prevalence of food insecurity at the ministerial level (National Level) Reduce the prevalence of food insecurity at the Moscours among which 50.3% in the Lékoumou	of the foundations of social protection is established and the technical and operational capacities of detection activities report of the foundations of social protection activities report of the DDAS (23 new primary schools integrated in the School activities, report of the DDAS (23 new primary schools integrated in the School activities, and 60 supervisors), of which 48 women art grained, for a coverage of 96%. NO 12 community leaders trained, for a coverage of 96%. 32 health agents trained, including 12 women 12 community leaders trained, including 12 women 140 community leaders trained, including 12 women 140 community leaders trained, including 12 women 140 community leaders trained on GBV and SBCC (40% of women) 140 community leaders trained underly leaders trained on GBV and SBCC (34 health workers and 24 community leaders trained on GBV and SBCC (34 health workers and 24 community leaders trained and trained in gender-based violence (GBV). 202 birth certificates were delivered to indigenous children have a birth certificate with the critificate with process of being delivered to indigenous children (14.16% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss) and 3,722 birth certificates in the process of being delivered to indigenous children (41.6% griss)



Output 3.1, indicator 1: Number of groups constituted (indigenous vs Bantou, disability, young mothers, #women groups vs #mengroups	0	16 (80% Indigenous groups, 50% group are women's groups)	22 groups formed (19 agricultural groups (84% Indigenous, 53% groups are women groups) and 3 palm oil production groups, comprising 33 indigenous youth (21 men, 12 women) and 10 Bantu youth (6 men, 4 women)	16 groups formed and 6 existing groups benefited from capacity building in group management and structuring	22 groups
Output 3.1 indicator 2: Number of groups/persons benefiting capacity strengthening (indigenous vs Bantou, disability, young mothers, #women groups vs #men groups)	0	16 (80% Indigenous groups, 50% group are women's groups)	22 groups (19 agricultural groups and 3 oil production) totalling 256 persons (80% indigenous and 50% women) were trained in groups management and structuration	3 groups of young palm oil producers supported to enable the supply of palm oil to the soap cooperative of indigenous created by UNFPA in Sibiti	22 groups
Output 3.1 indicator 3: Number of households having income increased (indigenous vs Bantou, disability, young mothers, #womengroups vs #men groups	0	Baseline survey to be determined	256 households (including 50 vulnerable Bantus and 114 indigenous women) have their income increased	n/a	256 households



Annex 2: Strategic documents

2.1. Contribution to social protection strategies, policies, and legal frameworks

Strategic documents developed or adapted by JP

Title of the document	Date when finalised (MM/YY)	Focus on extending social protection coverage (Yes/No)	Focus on improved comprehensiveness of social protection benefits (Yes/No)	Focus on enhancing adequacy of social protection benefits (Yes/No)	Focus on improving governance, administration and/or implementation of social protection system (Yes/No)	Focus on cross-sectoral integration with healthcare, childcare, education, employment, food security, etc.	If published, provide the hyperlink
Study on the food and nutritional situation of indigenous peoples in the Congo July 2021	July 2021	Yes	Yes	Yes	No	Yes	NO

Strategic documents for which JP provided contribution (but did not produce or lead in producing)

	TTTTT F		button (but did not pi		m producing)		
Title of the document	Date when finalised (MM/YY)	Focus on extending social protection coverage (Yes/No)	Focus on improved comprehensiveness of social protection benefits (Yes/No)	Focus on enhancing adequacy of social protection benefits (Yes/No)	Focus on improving governance, administration and/or implementation of social protection system (Yes/No)	Focus on cross-sectoral integration with healthcare, childcare, education, employment, food security, etc.	If published, provide the hyperlink
Standardised Monitoring and Assessment of Relief and Transitions (SMART) inter- agencies study focused on Nutritional status of children under-five and Mortality rate of the population.	February - mars 2021	Yes	Yes	Yes	Yes	Yes	NO

2.2. Focus on vulnerable populations

Strategic documents developed or adapted by JP

Title of the document	Date when finalised (MM/YY)	Focus on gender equality and women empowerment (Yes/No)	Focus on children (Yes/No)	Focus on youth (Yes/No)	Focus on older persons (Yes/No)	Focus on another group/s (List the group/s)	Focus on PwDs (Yes/No)	Included disaggregated data by disability - and whenever possible by age, gender and/or type of disability (Yes/No)
UNDAF (Adapted by JP)	2021	Yes	Yes	Yes	Yes	Yes	YEs	Yes



Strategic documents for which JP provided contribution (but did not produce or lead in producing)

Title of the document	Date when finalised (MM/YY)	Focus on gender equality and women empowerment	Focus on children (Yes/No)	Focus on youth (Yes/No)	Focus on older persons (Yes/No)	Focus on another group/s (List the group/s)	Focus on PwDs (Yes/No)	Included disaggregated data by disability - and whenever possible by age, gender and/or type of disability (Yes/No)
National Development Plan	2022	Yes	Yes	Yes	Yes	Yes	Yes	No

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Annex 3: Updated JP Risk Management Matrix

Risks	Risk Level: (Likelihood x Impact)	Likelihood: Certain - 5 Likely - 4 Possible - 3 Unlikely - 2 Rare – 1	Impact: Essential - 5 Major - 4 Moderate - 3 Minor - 2 Insignificant - 1	Mitigating measures	Responsible Org./Person							
Contextual risks (e.g., social, environmental, security and safety risks) 5												
Impact of Covid-19 measures on Staff and activities	20	5	4	Engaging with the private sector for mobilising resources	PUN0							
Programmatic/Operational risks												
Limited number and capacity of partners and vendors	16	4	4	Increase the number of partners and vendors	PUNO							
Weak capacity of governmental and non-governmental partners in planning, implementing, and monitoring program management and lack of critical mass of NGOs with the required expertise.	25	5	5	Capacity building of partners, including NGOs, in program management. Close monitoring of project implementation by UN agencies in the UNDAF Joint Accountability Framework	PUNO							
Institutional risks (e.g., political, regulate	ory risks)											
Congress elections	9	3	3	Planning ahead of the election	PUNO							
Fiduciary risks (financial risks, fraud & c	orruption risks)											
Weak financial management and absorption capacity of government and non-government implementing partners receiving cash transfers	25 5		5	Strengthening the capacity of partners, including NGOs, in program management. Close monitoring of project implementation by United Nations agencies. UN staff follow closely all the expenses of the partners and insured that all the activities are implemented according to the plan The steering committee also follow all the actions under this joint programme	PUNO							